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State of New Hampshire

Department of Safety

Division of Motor Vehicles

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CDL SKILLS TEST WAIVER MILITARY APPLICATION

Purpose: Use this form to request a military waiver of the Commercial Driver's License (CDL) Skills Test when applying for a CDL for vehicle class(es) representative of the Commercial Motor Vehicle (CMV) operated during military service.

Instructions: Completed form must be signed by applicant and commanding officer/designee and submitted with a completed Driver's License and Identification Card Application to any DMV customer service center.

This form must be submitted within 30 days of the commanding officer/designee signature date and submitted to the New Hampshire Division of Motor Vehicles within 90 days from discharge from military service.

ELIGIBILITY INFORMATION:

To qualify for a CDL Skills Test Waiver, the applicant must meet the following eligibility requirements:

Be a New Hampshire resident.

Hold a New Hampshire driver's license or be eligible for a New Hampshire driver's license.

Successfully pass the CDL Knowledge Tests.

Present an Active Duty/Reserve/Guard ID Card, DD Form 214, 256, 257 (Honorable or General discharge only) or NGB 22.

Other documents provided will be evaluated in accordance with RSA 21:50.

Meet the requirements of FMCSA Regulation 383.77.

APPLICANT INFORMATION (PLEASE PRINT):

APPLICANT'S FULL LEGAL NAME: (Last)	(First)	(MI)	(Suffix)	Birthdate (mm/dd/yyyy)
SOCIAL SECURITY NUMBER:	NH DMV CUSTOMER NUMBER:		SERVICE BRANCH (SPECIFY):	

APPLICANT DRIVING RECORD:

<input type="checkbox"/> YES <input type="checkbox"/> NO	I am regularly employed or was regularly employed within the last 90 days in a military position requiring operation of a commercial motor vehicle : AND,	DISCHARGE DATE (from DD 214) (mm/dd/yyyy):
<input type="checkbox"/> YES <input type="checkbox"/> NO	For at least 2 years immediately preceding this application date if actively serving, or preceding the date of my military discharge, I operated a vehicle representative of the CDL classifications I am applying for.	

During the 2 years before the date of this application:

- | | | | |
|---|--|--|--|
| • Have you had more than one license (except for a military license)? | <input type="checkbox"/> Yes <input type="checkbox"/> No | • Have you had any license suspended, revoked or cancelled in this or any state? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
|---|--|--|--|

During the 2 years before the date of this application, have you been convicted of any alcohol or other driving offenses?

Please list below: (civilian and military).

APPLICANT CERTIFICATION:




I certify and affirm that all information I have presented in this form is true and correct, that any documents I have presented to DMV are genuine, and that the information included in all supporting documentation is true and accurate. I make this certification and affirmation under penalty to perjury and I understand that knowingly making a false statement or representation on this form is a criminal violation. Pursuant to RSA 641:3

APPLICANT SIGNATURE:

DATE:

COMMANDING OFFICER'S CERTIFICATION OF COMMERCIAL DRIVING EXPERIENCE			
COMMANDING OFFICER'S NAME (LAST, FIRST, MIDDLE)		TELEPHONE NUMBER	
STREET ADDRESS			
CITY	STATE	ZIP CODE	COUNTY
SERVICE MEMBER'S DATE OF QUALIFICATION:	FROM	TO	
SERVICE MEMBER'S NAME			EXPIRATION DATE (US Gov't Motor Vehicle Operator Identification Card / License)

Circle the highest class of vehicles the service member has been driving:

Class	Vehicle Description	EXAMPLE OF VEHICLES IN GROUP
A	* 5th WHEEL - Truck Tractor/Semitrailer Any combination of vehicles with a GCWR of 26,001 or more pounds provided the GVWR of the vehicle(s) being towed is in excess of 10,000 pounds.	
A	* PINTLE HOOK - Truck Trailer Combination Any combination of vehicles with a GCWR of 26,001 or more pounds provided the GVWR of the vehicle(s) being towed is in excess of 10,000 pounds.	
B	Any single vehicle with a GVWR of 26,001 or more pounds or any such vehicle towing a vehicle not in excess of 10,000 pounds GVWR.	

The vehicle the service member operates **is** equipped with a **full air brake system**:

☐ YES ☐ NO

The vehicle the service member operates **is** equipped with an **air-over-hydraulic** braking system:

☐ YES ☐ NO

The transmission in the vehicle the service member operates is:

☐ AUTOMATIC

☐ MANUAL

I certify that the applicant named in PART 1 is/was assigned in a job/assignment requiring operation of a commercial motor vehicle that the information I have provided is correct.

Signed under penalty of unsworn falsification pursuant to RSA 641:3.

PRINT COMMANDING OFFICER'S NAME/RANK	DATE
SIGNATURE	DATE